

SERFF Tracking Number: NALH-128521744 State: Arkansas  
 Filing Company: Midland National Life Insurance Company State Tracking Number:  
 Company Tracking Number: FORM 2180 4-05 REVISED DATA PAGES AND GUARANTEED PREMIUM RATES  
 TOI: L04I Individual Life - Term Sub-TOI: L04I.103 Renewable - Single Life -  
 Fixed/Indeterminate Premium  
 Product Name: Form 2180 4-05 revised data pages and guaranteed premium rates  
 Project Name/Number: Form 2180 4-05 revised data pages and guaranteed premium rates/Form 2180 4-05 revised data pages and guaranteed premium rates

## Filing at a Glance

Company: Midland National Life Insurance Company

Product Name: Form 2180 4-05 revised data pages and guaranteed premium rates SERFF Tr Num: NALH-128521744 State: Arkansas

TOI: L04I Individual Life - Term SERFF Status: Closed-Approved- Closed State Tr Num:

Sub-TOI: L04I.103 Renewable - Single Life - Fixed/Indeterminate Premium Co Tr Num: FORM 2180 4-05 REVISED DATA PAGES AND GUARANTEED PREMIUM RATES State Status: Approved-Closed

Filing Type: Form Reviewer(s): Linda Bird  
 Author: Sherry M. Olson Disposition Date: 07/06/2012  
 Date Submitted: 06/27/2012 Disposition Status: Approved-Closed

Implementation Date Requested: On Approval Implementation Date:  
 State Filing Description:

## General Information

Project Name: Form 2180 4-05 revised data pages and guaranteed premium rates	Status of Filing in Domicile: Authorized
Project Number: Form 2180 4-05 revised data pages and guaranteed premium rates	Date Approved in Domicile: 06/18/2012
Requested Filing Mode: Review & Approval	Domicile Status Comments: Approved by Midland's domicile state of Iowa on 6/18/12
Explanation for Combination/Other:	Market Type: Individual
Submission Type: New Submission	Individual Market Type:
Overall Rate Impact:	Filing Status Changed: 07/06/2012
	State Status Changed: 07/06/2012
Deemer Date:	Created By: Sherry M. Olson
Submitted By: Sherry M. Olson	Corresponding Filing Tracking Number:
Filing Description:	
Re: Midland National Life Insurance Company	
NAIC #66004 FEIN # 46-0164870	

SERFF Tracking Number: NALH-128521744 State: Arkansas  
Filing Company: Midland National Life Insurance Company State Tracking Number:  
Company Tracking Number: FORM 2180 4-05 REVISED DATA PAGES AND GUARANTEED PREMIUM RATES  
TOI: L04I Individual Life - Term Sub-TOI: L04I.103 Renewable - Single Life -  
Fixed/Indeterminate Premium  
Product Name: Form 2180 4-05 revised data pages and guaranteed premium rates  
Project Name/Number: Form 2180 4-05 revised data pages and guaranteed premium rates/Form 2180 4-05 revised data pages and guaranteed premium rates

Revised specification pages for Policy Form 2180 4-05 SP, Annually Renewable Term Life Insurance Policy and Revised Guaranteed Premium Rates

We are filing revised specification pages 1 and 1A for Annually Renewable Term Life Insurance Policy Form 2180 4-05 SP, which was originally approved by your Department on 9/21/2005, (SERFF Tr#: USPH&#8722;6G8PWW492/00&#8722;00/00&#8722;00/00).

We have revised the guaranteed premium rates for this form, which is an individual annually renewable term life insurance policy with only guaranteed premiums; there are no non-guaranteed premiums. Premiums are payable until the insured's age 95, when coverage terminates. Premiums increase annually until the insured's age 95. A revised actuarial memorandum is also attached.

We also added a form number to each specification page:

Form 2180 1 6-12 – specification page 1

Form 2180 1A 6-12 – specification page 1A

Policy Form 2180 4-05 SP is used in the bank-, credit union- or corporate-owned life insurance market by specialized agents who focus on this market. Please see the attached actuarial memorandum for additional details.

This form is not illustrated.

For informational purposes, included in this filing is a Statement of Variability that provides the variable ranges and variable text for the bracketed information.

If you need any additional information to complete your review, please feel free to contact me at 800-283-5433, ext. 36223, or at [solson@sfgmembers.com](mailto:solson@sfgmembers.com).

Sincerely,

Sherry Olson  
Senior Contract Analyst  
Corporate Markets Center  
Midland National Life Insurance Company &  
North American Company for Life and Health Insurance  
State Narrative:

SERFF Tracking Number: NALH-128521744 State: Arkansas

Filing Company: Midland National Life Insurance Company State Tracking Number:

Company Tracking Number: FORM 2180 4-05 REVISED DATA PAGES AND GUARANTEED PREMIUM RATES

TOI: L04I Individual Life - Term Sub-TOI: L04I.103 Renewable - Single Life - Fixed/Indeterminate Premium

Product Name: Form 2180 4-05 revised data pages and guaranteed premium rates

Project Name/Number: Form 2180 4-05 revised data pages and guaranteed premium rates/Form 2180 4-05 revised data pages and guaranteed premium rates

## Company and Contact

### Filing Contact Information

Sherry Olson, Senior Contract Analyst solson@mnlife.com  
 2000 44th St. South, Suite 300 701-433-6223 [Phone]  
 Fargo, ND 58103 701-433-8223 [FAX]

### Filing Company Information

Midland National Life Insurance Company CoCode: 66044 State of Domicile: Iowa  
 525 W. Van Buren Street Group Code: 431 Company Type: Life and Annuity  
 Chicago, IL 60607 Group Name: State ID Number:  
 (800) 800-3656 ext. [Phone] FEIN Number: 46-0164570

-----

## Filing Fees

Fee Required? Yes  
 Fee Amount: \$50.00  
 Retaliatory? No  
 Fee Explanation: \$50 per policy form  
 Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
Midland National Life Insurance Company	\$50.00	06/27/2012	60463905

SERFF Tracking Number: NALH-128521744 State: Arkansas  
 Filing Company: Midland National Life Insurance Company State Tracking Number:  
 Company Tracking Number: FORM 2180 4-05 REVISED DATA PAGES AND GUARANTEED PREMIUM RATES  
 TOI: L04I Individual Life - Term Sub-TOI: L04I.103 Renewable - Single Life -  
 Fixed/Indeterminate Premium  
 Product Name: Form 2180 4-05 revised data pages and guaranteed premium rates  
 Project Name/Number: Form 2180 4-05 revised data pages and guaranteed premium rates/Form 2180 4-05 revised data pages and guaranteed premium rates

## Correspondence Summary

### Dispositions

Status	Created By	Created On	Date Submitted
Approved-Closed	Linda Bird	07/06/2012	07/06/2012

## Disposition

Comment:

PDF Pipeline for SERFF Tracking Number NALH-128521744 Generated 07/06/2012 09:44 AM

SERFF Tracking Number: NALH-128521744 State: Arkansas

Filing Company: Midland National Life Insurance Company State Tracking Number:

Company Tracking Number: FORM 2180 4-05 REVISED DATA PAGES AND GUARANTEED PREMIUM RATES

TOI: L04I Individual Life - Term Sub-TOI: L04I.103 Renewable - Single Life - Fixed/Indeterminate Premium

Product Name: Form 2180 4-05 revised data pages and guaranteed premium rates

Project Name/Number: Form 2180 4-05 revised data pages and guaranteed premium rates/Form 2180 4-05 revised data pages and guaranteed premium rates

Schedule	Schedule Item	Schedule Item Status	Public Access
Supporting Document	Flesch Certification		Yes
Supporting Document	Application		No
Supporting Document	Life & Annuity - Acturial Memo		No
Supporting Document	Statement of Variability		Yes
Form	Specifciation page 1 for Form 2180 4-05		Yes
Form	Specifciation page 1A for Form 2180 4-05		Yes

SERFF Tracking Number: NALH-128521744 State: Arkansas

Filing Company: Midland National Life Insurance Company State Tracking Number:

Company Tracking Number: FORM 2180 4-05 REVISED DATA PAGES AND GUARANTEED PREMIUM RATES

TOI: L04I Individual Life - Term Sub-TOI: L04I.103 Renewable - Single Life - Fixed/Indeterminate Premium

Product Name: Form 2180 4-05 revised data pages and guaranteed premium rates

Project Name/Number: Form 2180 4-05 revised data pages and guaranteed premium rates/Form 2180 4-05 revised data pages and guaranteed premium rates

## Form Schedule

### Lead Form Number:

Schedule Item Status	Form Number	Form Type	Form Name	Action	Action Specific Data	Readability	Attachment
	Form 2180 1 6-12	Schedule Pages	Specifciation page 1 for Form 2180 4-05	Initial		0.000	MNL Form 2180 1 6-12.pdf
	Form 2180 1A 6-12	Schedule Pages	Specifciation page 1A for Form 2180 4-05	Initial		0.000	MNL Form 2180 1A 6-12.pdf

\*\*\*\*\* SPECIFICATIONS PAGE \*\*\*\*\*

\*\*\* SCHEDULE OF BENEFITS \*\*\*

TYPE BASIC BENEFIT	AMOUNT	EXPIRY DATE	FORM
[ONE YEAR TERM]	[\$100,000]	[01-01-2072]	2180

\*\*\* SCHEDULE OF FIRST YEAR PREMIUMS \*\*\*

TYPE OF BENEFIT	ANNUAL	SEMI-ANNUAL	QUARTERLY	MONTHLY	GTD PERIOD
ONE YEAR TERM	[\$116.00]	[\$59.46]	[\$30.96]	[\$11.04]	1 YEAR

INSURED:  
[JOHN DOE]

ISSUE AGE AND SEX:  
[35] [MALE]

RATE CLASS:  
[STANDARD]

EFFECTIVE DATE: [JANUARY 1, 2012]

POLICY NUMBER: [01232090]

ISSUE DATE: [JANUARY 1, 2012]

BASIC BENEFIT AMOUNT: [\$100,000]

OWNER: [THE INSURED]



INSURED: [JOHN DOE]

POLICY NUMBER: [ 01232090]

\*\*\* SCHEDULE OF RENEWAL PREMIUMS \*\*\*

ANNUAL PREMIUMS FOR POLICY

POLICY DURATION	GUARANTEED PREMIUM	POLICY DURATION	GUARANTEED PREMIUM
2	128.00	32	3,580.00
3	143.00	33	3,949.00
4	164.00	34	4,345.00
5	192.00	35	4,777.00
6	228.00	36	5,265.00
7	275.00	37	5,907.00
8	335.00	38	6,454.00
9	413.00	39	7,186.00
10	514.00	40	8,008.00
11	568.00	41	8,890.00
12	609.00	42	9,829.00
13	652.00	43	10,816.00
14	699.00	44	11,841.00
15	751.00	45	12,928.00
16	807.00	46	14,121.00
17	873.00	47	15,448.00
18	949.00	48	16,948.00
19	1,035.00	49	18,688.00
20	1,134.00	50	20,670.00
21	1,243.00	51	22,884.00
22	1,365.00	52	25,338.00
23	1,494.00	53	28,018.00
24	1,633.00	54	30,890.00
25	1,791.00	55	33,920.00
26	1,966.00	56	37,082.00
27	2,161.00	57	40,056.00
28	2,383.00	58	43,156.00
29	2,637.00	59	46,426.00
30	2,923.00	60	49,880.00
31	3,240.00		

INQUIRIES REGARDING YOUR POLICY SHOULD BE DIRECTED TO YOUR AGENT, OR, IF HE OR SHE IS NOT AVAILABLE TO OUR CORPORATE MARKETS CENTER AT THE FOLLOWING ADDRESS:

MIDLAND NATIONAL LIFE INSURANCE COMPANY  
[ATTN: POLICYOWNER SERVICE  
CORPORATE MARKETS CENTER  
2000 44TH ST. SOUTH, SUITE 300  
FARGO, ND 58103  
(800) 283-5433]

SERFF Tracking Number: NALH-128521744 State: Arkansas

Filing Company: Midland National Life Insurance Company State Tracking Number:

Company Tracking Number: FORM 2180 4-05 REVISED DATA PAGES AND GUARANTEED PREMIUM RATES

TOI: L04I Individual Life - Term Sub-TOI: L04I.103 Renewable - Single Life - Fixed/Indeterminate Premium

Product Name: Form 2180 4-05 revised data pages and guaranteed premium rates

Project Name/Number: Form 2180 4-05 revised data pages and guaranteed premium rates/Form 2180 4-05 revised data pages and guaranteed premium rates

## Supporting Document Schedules

	Item Status:	Status Date:
<b>Satisfied - Item:</b> Flesch Certification		
<b>Comments:</b>		
<b>Attachment:</b>		
2180 6-12 data pages & rates AR Cert.pdf		

	Item Status:	Status Date:
<b>Bypassed - Item:</b> Application		
<b>Bypass Reason:</b> NA to data pages		
<b>Comments:</b>		

	Item Status:	Status Date:
<b>Satisfied - Item:</b> Life & Annuity - Acturial Memo		
<b>Comments:</b>		
<b>Attachment:</b>		
Actuarial Memorandum _Form 2180_ 5-2012.pdf		

	Item Status:	Status Date:
<b>Satisfied - Item:</b> Statement of Variability		
<b>Comments:</b>		
<b>Attachment:</b>		
2180 data pages Statement of Variability.pdf		

TO: Arkansas Department of Insurance

FROM: Midland National Life Insurance Company

DATE: June 27, 2012

RE: Data pages: Form 2180 1 6-12 – specification page 1; Form 2180 1A 6-12 – specification page 1A  
for Policy Form 2180 4-05 SP

North American Company for Life and Health Insurance certifies that Policy Form 2180 4-05 SP complies with

- Arkansas Regulation 49 regarding Life and Health Guaranty notices given to each policy owner.
- Arkansas Code Annotated 23-79-138 regarding a Consumer Information Notice accompanying every policy.
- Arkansas Regulation 19 § 10B regarding unfair sex discrimination in insurance.
- ACA 23-80-206, regarding Flesch certification, for the policy in its entirety.



Carmen R. Walter  
Assistant Vice President, Product Development  
Corporate Markets  
Midland National Life Insurance Company

Date: June 27, 2012

STATEMENT OF VARIABILITY  
Policy Form Series 2180 Data Pages: 2180 1 6-12, 2180 1A 6-12

The following is a list of bracketed items and the corresponding range of text and/or values.

Bracketed Item	Variable Text/Range
SCHEDULE OF BENEFITS - TYPE BASIC BENEFIT	Plan name
SCHEDULE OF BENEFITS - AMOUNT	Varies by policyowner
SCHEDULE OF BENEFITS - EXPIRY DATE	Anniversary date closest to insured's age 95
SCHEDULE OF FIRST YEAR PREMIUMS - AMOUNT: ANNUAL, SEMI-ANNUAL, QUARTERLY, MONTHLY	Varies by policyowner
INSURED	Varies by policyowner
ISSUE AGE AND SEX	Varies by policyowner
RATE CLASS	<p>Preferred, Standard or Special if policy is extra rated</p> <p>If policy is extra rated, the heading on page 1A is asterisked and additional disclosure prints on page 1A.</p> <p>If the policy is table rated, the following disclosure prints: YOUR POLICY WAS ISSUED IN A SPECIAL RATE CLASS. PREMIUM INCLUDES A [XX]% INCREASE IN RATES.</p> <p>If the policy has a flat extra rating, the following disclosure prints: YOUR POLICY WAS ISSUED IN A SPECIAL RATE CLASS. PREMIUM INCLUDES A \$[X] PER THOUSAND INCREASE IN RATES FOR [Y] YEARS. X = the dollar amount of the additional premium and may range from \$1- \$50/thousand and Y = the number of years the additional premium applies and may range from 1 year to the duration of the policy, based on underwriting.</p>
EFFECTIVE DATE	Varies by policyowner
POLICY NUMBER	Varies by policyowner
ISSUE DATE	Varies by policyowner
BASIC BENEFIT AMOUNT	Varies by policyowner
OWNER	Varies by policyowner
POLICYOWNER SERVICE ADDRESS ON PAGE 1A	Bracketed to reserve the right to change or delete addresses and contact information without re-filing this form